PTO/SE/21 (09-04) rough 07/31/2006. OMB 0651-0031

Approved for use through 07/31/2006. OMB 0651-0031

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PE		Application Number	er	10/048,24	4		
TRANSMITTAL		Filing Date		August 27, 2002			
FORM	First Named Inven	tor	Donald K. Blumenthal II 1743 A. Soderquist 0274-3858.1US (U-2429)				
	Art Unit						
used for all correspondence after i	Examiner Name						
otal Number of Pages in This Submissi	Attorney Docket N	umber					
	ENCLO	SURES (check all tha	t apply)				
Fee Transmittal Form	☐ Drawing(s)			After Allowance Communication to TC			
Fee Attached, Check No. 23685 in the amount of \$75.00	Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences			
	Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final	Petition to Convert to a Provisional Application			Proprietary Information			
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address			Status L	etter		
Extension of Time Request and Check No. 23684 in the amount of \$60.00	Terminal Disclaimer			Other Enclosure(s) (please identify below):			
Express Abandonment Request	Request for Refund						
Information Disclosure Statement	CD, Number of CD(s) Landscape Table on CD						
Certified Copy of Priority Document(s)	Remarks	<u></u>	_				
Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR1.52 or 1.53	with any docu	sioner is authorized to c ament or request requiri unt 20-1469 during pen	ng fee pay	ment under 3	es required but not submitted 37 C.F.R. §§ 1.16 AND 1.17 T		
SIGN	ATURE OF	APPLICANT, ATTOI	RNEY, O	R AGENT			
Firm	TraskBritt, P.C.						
Signature	tides	7/8h_					
Printed Name	Brick G. Power						
Date	April 30, 2007	rii 30, 2007 Reg. No. 38,581					
	CERTIFICA	TE OF TRANSMISS	ION/MAI	LING			
I hereby certify that this corresponden Service with sufficient postage as fin Alexandria, VA 22313-1450 on the date	st class mail i	in an envelope addres	ne USPTO ssed to: C	or deposited ommissioner	d with the United States Pos for Patents, P.O. Box 145		
Signature	w. Ku	wand					
Typed or printed name Leta M. H	7-1			Date	April 30, 2007		

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/17 (12-04v2)

Approved for use through 07/31/2007. OMB 0651-0032

Fee (\$)

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60.00

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL for FY 2007 Applicant claims small entity status. See 37 CER 1 27		4818)	Complete if Known					
			Application Number 10/048,244					
		Filing	Date	8/27/2002				
			lamed Inventor	Donald K. Blumenthal II				
Applicant claims small entity status. See 37 CFR 1.27		27 _{Exami}	ner Name	A. Soderquist				
			Art Un	it	1743			
TOTAL AMOUNT OF PAYMENT		\$) 135.00	Attorn	ey Docket No.	0274-3858.1US (U			
METHOD OF PAYMENT	(check al	l that apply)						
🛛 Check 🔲 Credit Card	l 🔲 Mor	ney Order 🔲 Nor	ne 🗌 Other	(please identify):			
Deposit Account Depo	sit Accoun	Number: 20-1469	9	Deposit Acco	unt Name: Trasl	kBritt, PC		
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Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Extra Claims Fee Paid (\$) <u>Fee(\$)</u> Multiple Dependent Claims -27 or HP= <u>30</u> 3 25 <u>75</u> Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20.

 Indep. Claims
 Extra Claims
 Fee(\$)
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HP = highest number of independent claims paid for, if greater than 3.

Other (e.g., late filing surcharge): Extension of Time

3. APPLICATION SIZE FEE

Fee Description

Each claim over 20 (including Reissues)

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fe

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

- 100 = ____ / 50 = ____ (round up to a whole number) x = ____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

SUBMITTED BY /						
Signature	Lich	/m_	Registration No. (Attorney/Agent)	38,581	Telephone	801-532-1922
Name (Print/Type)	Brick G. Power				Date	April 30, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.